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STRUCTURING SELF-IMAGE WITH CHILDREN

by

Margaret M. de la Salle

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ABSTRACT

The purpose of this study was to adapt a Structuring Self-Image technique, based on Neurolinguistic Programming principles, for use with children referred for adjustment problems and to assess the effect of the program on the children's personalities. The Piers-Harris Children's Self-Concept Scale and the children's Personality Questionaire were administered to six female subjects, ages 7 to 11 years, before and after 5 weekly group sessions. Six hypotheses were formulated and the means, standard deviations, and correlated 't' tests were computed on the scale scores. The only significant difference ($p < .025$) occurred in emotional stability. There were no significant changes in self-concept, willingness to act with the group, outgoing behavior, self-assuredness, or excitability. Limitations of the study, possible reasons for significant increases in emotional stability and lack of significance on the other 5 variables, and clinical observations of the program were discussed and suggestions were made for future research.

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CHAPTER ONE

INTRODUCTION

A. Background

Research in imagery has expanded immeasurably over the last 30 years, as indicated by the numerous books dealing with this topic (Sheehan, 1972; Sommer, 1978; Singer, 1974; Richardson, 1969). Although the majority of studies deal with the use of imagery in such cognitive processes as perception, memory, and thinking, imagery is used extensively in promoting therapeutic personality change.

The major theories from Behaviorism to Existentialism make use of the person's ability to imagine herself/himself going through a variety of activities or scenes as part of the psychotherapeutic learning process. Mental rehearsal, where the person sees and feels herself/himself go through an activity, has been most effective in improving performance on physical tasks (Richardson, 1969; Marks, 1977; Anderson,1980). A person's ability to use imagination has also been effective for conditioning responses (Leuba & Dunlop, 1951), controlling pain (Raphael, 1981), enhancing self-awareness (Wilkins, 1975), resolving psychological problems (Mook, 1975), reducing anxiety, and increasing positive self-regard (Morrison & Cometa, 1980). Although the majority of studies deal with adult subjects, imagery has been used effectively for decreasing acting out behavior in latency age males (Scheidler, 1972), increasing self-awareness in teenagers and young adults (Kelly, 1972), and

enhancing self-concept in teenagers (Sarkisian, 1974; Harris, Nolte & Nolte, 1980; Reardon & Tosi, 1977). The major theories that use imagery in therapy assume that imagining an event has a similar effect on the individual as experiencing the event (Mark, 1977; Sheikh & Panagiotou, 1975). This process of imagination requires access to and manipulation of all the sensory modalities.

Personality change necessitates a total, organismic change in meaning where past experiences are re-organized and new associations emerge (Erickson & Rossi, 1982). The new associations change the person's frame of reference, thereby changing their perception of a situation. Openness to new ways of learning occur when habitual patterns are disrupted and occur below the level of conscious awareness.

> "And our main, very difficult learning we achieve without knowing that we are achieving those learnings." (Erickson & Rossi, 1982, p.120)

The above quote, by M.H. Erickson, refers to experiential learning which involves a total organismic change. Imagery may be a fundamental part of this total organismic learning process. The insights one gains using the verbal modality is less effective than the meaning gained through imagery (Shorr, 1974). Imagery bypasses the filtering of verbal thought processes, contains information not available in verbal thought, and is more closely associated with unconscious thought processes (Sheikh & Panagiotou, 1975).

Recently, a new movement developed in psychology which relies on the use of imagery for promoting personality change. Neuro Linguistic Programming, defined by Lankton (1980) as the study of the structure of subjective experience, has become increasingly more popular since its inception in 1975. The proponents of Neuro Linguistic Programming, beginning with Richard Bandler and John Grinder, developed a model of communication and behavior based on their study of successful therapists, such as Milton Erickson, Fritz Perls, and Virginia Satir. According to the model we translate what we experience through our senses into internal representations of the world. These internal representations become our reference points for relating with the world. Since the internal representation is a model of the world, not the real world, distortion of the real world can occur. When a distortion occurs, the person relates to the world and/or others as if the world was congruent with his internal representation of it. When this process of relating to a model rather than the actual world occurs, choices in communication and behavior become limited.

The model, or internal representation, is essentially the unique way an individual processes information internally. Since it is based on sensory experience, the structure of how an individual processes information internally can be recognized, based on the therapist's sensory experience of the client. Once the structure of that experience is known, various techniques are available for changing the structure. The person is then able to access alternate ways of relating to the situation. One

of the basic assumptions of Neuro Linguistic Programming is that there are positive resources or unconscious knowledge within the individual that can be accessed and it is this knowledge that will aide the client in producing change. Successful therapy will result in a change in the client's representation of the world, making his representation more congruent with his actual experience.

B. Structuring Self-Image

One technique for changing the client's model of the world, developed by Lankton (1980), involves a restructuring of the self-image. According to the model there are unconscious conditioned thought processes that mediate our sensory perception of a stimuli and the feeling associated with it. The unconscious thought processes are a series of past associations of images of what we have experiences through our senses and have now dropped into habitual, automatic ways of operating. The person continues to think about his past associations of images in habitual, automatic ways. This unconscious internal thought process is called Residual Image Thinking, defined by Lankton (1978) as;

> "A memory that typically has the person represented as a feeling associated to the picture or sound of some event." (p.4)

According to Lankton, conditioned past associations of images or residual images guide one's behavior. These past associations are learned in the same way as routine tasks; that is, they are learned consciously and then drop into unconscious ways of

functioning. Residual images also have an interpersonal component and a feeling attached. Since residual image thinking is no longer operating at a conscious level, the person's choices for responding to the external stimuli is limited.

The underlying associations of images related to the self that are unconscious but mediate our behavior is called the Self-Image Thinking Structure. In many situations an individual's responses are accompanied by anxiety as a result of his/her habitual way of responding. Structuring the self-image is a technique for disrupting the underlying associations or residual images, thereby disrupting habitual patterns. The use of imagination to change self-image is the major component of the technique.

An individual's model of the world limits his/her choices when his/her representation of the world becomes impoverished (Bandler & Grinder, 1975). Analogously, the representation of self can also be impoverished, limiting the individual's choices in relating to particular situations. Disrupting the underlying conditioned associations will change the client's model or perspective and make it more congruent with actual experience, thereby increasing their choices in coping with stressful, anxiety provoking situations. Self-image is a reference point in relationships (Staats, 1979; Keen, 1975) and, therefore, central for any change to occur. In keeping with

Neuro Linguistic Programming principles, the self has positive resources for coping with situations, but the individual is unable to access these resources because of the negative feeling state associated with his/her self-image. The individual is only consciously aware of the stimuli and the feeling state. Disupting those associations that limit the individual's choices and adding new, more productive associations should result in an increase in positive self- regard.

This study was an attempt to adapt Lankton's Structuring Self-Image technique for use with children between the ages of 9 and 12 years. Although the technique was developed for adults, the basic assumptions apply;

1. underlying associations of images related to self mediate behavior;
2. these images are below the level of awareness; and
3. they can be disrupted and replaced with positive associations.

The latency period (approximately 7 to 12 years) of development appears to be an ideal time for developing a positive self-concept. Although the child tends to be a literal thinker and be reality oriented, imaginative and creative processes flourish. At this stage of development, the child lacks the cognitive ability for inductive reasoning and is not motivated for deep insight (Schiffer, 1977). Lankton's technique does not require insight into the

causes of negative self-concept. The technique interferes with prior negative associations by consciously creating positive associations to self.

The use of imagery has been effective for enhancing self- concept during adolescence (Sarkisian, 1974; Harris, et al., 1980; Reardon & Tosi, 1977) and during adulthood (Morrison & Cometa, 1980), but there have been few systematic studies showing similar effects with children who are referred for adjustment problems. The purpose of this research is to conduct a preliminary investigation of the use of Lankton's Structuring Self-Image technique with children.

CHAPTER TWO

LITERATURE REVIEW

A. Historical Review of Imagery

Interest in imagery began with philosophers in their attempt to understand subjective experience. The increasing interest in Behaviorism in the 1920's and the Western emphasis on natural scientific methodology left the study of imagery to theoretical speculation and introspectionism. The subjective nature of imagery made it anathema to natural science. Although imagery continued to be used by clinicians, no systematic research was conducted in the West between 1920 and 1950 (Shorr, 1974).

It was also the Behaviorists who were instrumental in bringing imagery back into the domain of scientific manipulation (Shorr,1974; Singer, 1975). Despite the theoretical assumptions of behaviorism, imagery is used extensively in Behavioral Therapies, such as, Systematic Desensitization, Emotive Imagery, Implosive Therapy, etc. Imagery is now used across a wide range of theoretical orientations from the structured behavioral approach to the classical psychoanalytic view (Strosahl & Ascough, 1981). Singer (1971) reviewed the different therapies using imagery and found 25 different approaches. Despite extensive use in therapy, he concluded that there were insufficient systematic studies on imagery

to warrant their use in clinical settings. This was based largely on his view that therapeutic techniques should be based on scientific principles. Singer's stress on measurement neglects the value experienced by clients in therapy. As Kisch and Kroll (1980) state:

> "The application of scientific methodology to the evaluation of psychotherapy leads to an emphasis upon that which is measurable, although possibly not relevant, certain narrow parameters of effectiveness, and an ignoring of that which is most relevant, meaningfulness." (p.409)

B. Review of Research on Imagery

Research into imagery and mental events appears to have proliferated over the last decade. Although the focus tends to be on those aspects of imagery which account for change, it appears evident that the use of imagery is an important factor in personality change.

Richardson's (1966;1969) reviews of the research on mental practice indicates that the use of imagery improves performance on physical tasks. The ability to use the visual and kinaesthetic modalities are important factors as the person "sees and feels himself go through the activity" (p.56). Richardson concluded that the ability to image was an important variable in assessing the effectiveness of therapy. Although most studies emphasize visual imagery, there is sufficient evidence to indicate that a person's ability to imagine, regardless of the modality, it an

important factor for improving performance (Richardson, 1969; Marks, 1977; Anderson,1980). The use of imagery has also been effective for improving learning and decision making, enhancing self-awareness, resolving psychological problems (Wilkins, 1976), developing personal meaning (Mook, 1975), reducing anxiety, and increasing positive self-regard (Morrison & Cometa, 1974).

One reason for the effectiveness of imagery in producing change resides in the ability of the individual to manipulate images and re-interpret experiences. As indicated by Morrison and Cometa (1974):

> "change is an internal process of accomodation re-interpretation, and re-construing of one's self and one's world." (p.39)

The importance of imagery as an internal process for evaluating and interpreting experience is evident in many theoretical orientations (See Shorr, 1974;Mook, 1975).

A review of the literature suggests that change involves an intricate relationship of the different sensory modalities, each having a different function. A number of studies indicate that an interrelationship of the different modalities is necessary for any change to occur (Strosahl & Ascough, 1981; Staats & Lohr, 1979). This is consistent with Richardson's finding that the ability to alternate between the visual and verbal modalities increases problem solving ability. Each modality has a unique function that gives us different information about an experience.

The exclusive use of one will limit one's understanding. The visual modality is more open to insight and creativity while the verbal modality has a logical defensive function (Shorr, 1974) and may act as a barrier to change. According to Sheikh, et al. (1975), the image may contain affective information that is not available in verbal thought and may be more closely associated with unconscious processes. The intensity of the affect associated with images and its relationship to unconscious processes adds knowledge to our interpretation of an experience. Gendlin (1971) considers the "intensive affective feeling process" as a necessary condition for personality change to occur. A greater understanding and use of imagery may increase the effectiveness of therapeutic techniques for producing change since it appears to circumvent any filtering by verbal thought processes (Sheikh & Panatiotou, 1975). This would enable the individual to access unconscious resources that can not be understood solely on the conscious, verbal level. Increasing an individual's ability to access images associated with the different modalities should increase their understanding of past experiences and enable them to re-interpret them in a new, more productive way. Once re-interpretation occurs, a reduction in anxiety and an increase in positive self-regard should result (Morrison & Cometa, 1980; Shorr, 1974; Lazarus, 1972). The intensity of the affective response generated through imagery and its closer relationship to unconscious processes may provide the impetus for a change in self-image to occur.

C. Self-Image Change

The importance of an individual's self-image as a factor in personality change is evident in many theoretical approaches from Social Behaviorism (Staats & Lohr, 1979) to Existentialism (Keen, 1975). The self is a reference point or mediator for behavior and the person evaluates and defines himself/herself in relationship to his/her world and others. A discrepancy can occur between what a person perceives himself to be and who he/she actually is (Shorr,1974;Cartwright, 1980). The person can construe an inaccurate image of himself/herself by perceiving experiences to fit in with his/her self-image. The person's capacity to perceive "reality" in a way is incongruent with his/her own lived-experience is not exclusive to existential theories of personality. As Morrison, et al., (1980,p. 36) state:

> "Piaget treats images as mental reconstructions of events which, being products of assimilation into existent structures, are subject to distortion and inaccuracy."

This idea is also implied in Lazarus' (1972) discussion of restructuring cognitive systems to fit into reality. Although this process of misconstruing experience is not a conscious, deliberate decision, habitual patterns develop which limit choices in relationships. For any personality change to occur, it must occur in relationship to the person's world and others (Gendlin, 1971) and it must occur in relation to self.

Similarily, therapists who work with children assume that

the self is a reference point for behavior and that experience can be misperceived to fit with an inaccurate image of self. There is a fundamental sense of self that is growth oriented and a drive toward self-realization (Axeline, 1969; Oaklander, 1978; Winnicott, 1971). Oaklander (1978) describes poor self-concept as a lost sense of self. Therapy can be a process of uncovering this lost sense of self, thereby enhancing the self-concept.

Although the use of imagery has been effective for enhancing the self-concept during adolescence (Reardon & Tosi, 1977; Harris, et al., 1980; Sarkisian, 1974), there have been few studies showing similar effects with children during the latency period who are referred for adjustment problems. In one study (Barret, 1975) individual play therapy had no significant effect on self-concept with socially and psychologically maladjusted children. The author observed that changes made were not reflected in the self-concept measure used. In another study (Gaulden, 1975), group sessions with children had no significant effect on self-concept or disruptive behavior. However, a decrease in disruptive behavior was shown in one of the treatment groups that focused on relationship counselling. Although few systematic studies have been done with children in group therapy, Karson (1975) and Schiffer (1977) suggest that group therapy provides a corrective experience for changing behavior.

D. Research in Neuro Linguistic Programming

In a review of the research in Neuro Linguistic Programming, what is available tends to be descriptive in nature (Harmon & O'Neill, 1981) or developed to assess the validity of primary representational systems (Lange, 1981). A series of research projects in process (See Appendix A) also focus mainly on representational systems. There appears to be no published research relating directly to the use of Neuro Linguistic Programming techniques for changing self-image in children.

E. Conclusions

In reviewing the literature, some support was found for the use of self-image learning in children. The basic assumptions of Lankton's technique were also supported. These include the assumptions that:

1. Self-image is a reference point for behavior.
2. Experiences can be misconstrued to fit in with the self-image.
3. Imagery can be an important factor in personality change.
4. Change involves an intricate relationship of the different sensory modalities, each having a unique function.
5. The ability to manipulate images can be an important means of personality or behavior change.

The sparsity of available research using imagery to change self-image in the latency age group indicates the need for further research. The purpose of this study is to develope a program of

behavior or personality change, based on the use of imagery, for the use with latency age children.

CHAPTER THREE

METHODOLOGY AND DESIGN

A. Development of the program

The initial purpose was to adapt a re-structuring self-image technique (Lankton, 1978) for the use with children between the ages of 9 years and 12 years. This is essentially a technique for altering the negative ways we think of our self and replacing them with positive associations. Initially, disrupting prior associations and replacing them with new associations is a conscious process; with repetition it becomes unconscious or automatic.

Lankton's technique consisted of a sixty minute audoitape containing instructions for:

1. Building a Central Self-Image (CSI) through visual imagery.
2. Adding positive characteristics to the Central Self-Image.
3. Strengthening idiomotor connections between the Central Self-Image and the positive feelings.
4. Building up habit patterns.
5. Building scenerios associated to the Central Self-Image, from pleasant to increasingly more stressful.
6. Shaping perceptions with emanated images.

The technique focuses on the use of imagination, requiring a great deal of attention and concentration. In order to adapt the technique for children in the latency period, several modifications were made:

1. Instructions were shortened.
2. Art work and dramatic play were used to appeal to children in order to increase their understanding of the different concepts.
3. In the second and third phases, group members were separated into pairs. The leader worked with each pair in order to enhance their experience.

B. Hypothesis

In order to evaluate a change in positive feelings toward the self, a self-report inventory purporting to measure the child's perception of self was administered. The Piers-Harris Children's Self-Concept Scale (1969) was selected as a measure of phenomenal self-perception.

In order to ensure that the Central Self-Image has an interpersonal component, a second person, one who supports the child's positive feelings, is added to the picture. The child is then guided through various scenarios, from pleasant to increasingly more stressful. During these scenes, the Central Self-Image serves as a cue for the child to imagine self relating in more constructive ways. If effective, the child should be able to think of more productive ways to relate to the stressful situation. The present researcher believes that this intervention may result in changes in the child's personality, including interpersonal relationships. The

Children's Personality Questionaire (Porter & Cattell, 1972) was chosen to evaluate the effects of the program on the child's personality. This scale covers major personality dimensions and can be administered over a short period of time.

McIntyre and Drummond (1977), using the two instruments cited above, conducted a study to assess the contribution of various personality dimensions to the self-concept. They found 52% of the variance accounted for by the Children's Personality Questionaire Factors C,J,O,D, and A, in the order of their loadings (p. 296). Children with low self-concepts, measured by the Piers-Harris Children's Self- Concept Scale, were described as follows:

> "Children with low self-concepts tend to get emotional when frustrated, are easily perturbed, tend to give up easily, and are changeable in attitudes and interests. They tend to be evasive of responsibility, obstructive, and wrapped up in themselves." (p.296)

The present researcher believes that children in the present study may show similar changes on the Children's Personality Questionaire, namely, a greater emotional stability (Factor C) and a greater willingness to act with the group (Factor J). They may also become more self-assured (Factor O), more outgoing (Factor A), and less excitable (Factor D).

In summary, the six hypotheses of the study are as follows:

H_1 There will be a significant increase in self-concept as measured by the Piers-Harris Children's Self-Concept Scale, following the program.

H_2 There will be a significant increase in Factor C of the Children's Personality Questionaire following the program.

H_3 There will be a significant increase in Factor A of the Children's Personality Questionaire following the program.

H_4 There will be a significant decrease in Factor J of the Children's Personality Questionaire following the program.

H_5 There will be a significant decrease in Factor O of the Children's Personality Questionaire following the program.

H_6 There will be a significant decrease in Factor D of the Children's Personality Questionaire following the program.

C. Experimental Procedure

1. Sample

The sample consisted of six female subjects, ages 9 to 12 years, referred to a Children's Assessment and Counselling Center for group therapy. The presenting problems ranged from distractible, impulsive to self-critical, withdrawn, shy behaviors. Despite the apparent differences in the above behaviors, they are indicative of feelings of inadequacy (Oaklander, 1978).

In the initial session it was found that impulsive, distractible behavior made it difficult for the subjects to concentrate on purely imaginative material and attempts were made to modify the program as the sessions progressed.

2. Design

Since only a small number of subjects were referred to the Center for group therapy, it was not possible to form a representative control group. Despite this, an exploratory study was undertaken using a one group pretest-posttest design. In such a study, uncontrolled factors affecting internal validity are history, maturation, testing, instrumentation, and interaction. Of these variables, the major effect will likely be events occurring outside the counselling sessions. This researcher expects that this will have a deleterious effect upon the results, as the subjects' environments are characterized by instability.

The major uncontrolled variables affecting external validity are generalization and the effect of pretesting. The lack of a control group limits generalization to similar populations. Pretesting sensitizes subjects to the items which can result in better adjustment on the second test (Campbell & Stanley, 1969). Since this is an exploratory study, the intention of the researcher is to see the effect of the program on the selected population. Any attempt to generalize beyond the group would require further study.

3. Test Instruments

A. Piers-Harris Children's Self-Concept Scale

Self-concept was measured by the Piers-Harris Children's Self-

Concept Scale (Piers-Harris, 1969), a forced-choice self-report inventory consisting of 80 items reflecting the child's feelings about himself/herself. The test requires a Grade three reading knowledge but can be administered to children below this age on an individual basis. The authors report split-half reliabilities of .91 and .87 (on Grade 6 and Grade 10 samples) and test-retest reliabilities (at two month and four month intervals) of .77. Construct validities of .68 with Lipsett's Children's Self-Concept Scale and -.64 and -.48 with SRA Junior Inventory Big Problems and Health Problems, respectively, are reported. Although the authors stress the importance of subjective reports for assessing phenomenal self-perception,correlations with teacher and peer ratings of .40 were found. Bentler (Buro, 1976) reports correlations of -.54 and -.69 with anxiety.

B. Children's Personality Questionaire

The Children's Personality Questionaire (Porter & Cattell, 1972) is a standardized personality inventory developed for children ages 8 to 12 years. The test measures 14 dimensions of personality, each functionally independent and described in bi-polar terms. (See Appendix C). There are four parallel forms but inter-form consistency is low (Gough,1978). Split-half reliabilities and test-retest reliabilities (of a two day interval) for each factor are reported, these range from .25 to .68 and .47 to .72 respectively. Conceptual validities reported are based on the development of the test through factor analysis. The authors cite examples of empirical validities ranging form academic achievement to personality profiles for

various populations.

4. Procedure

The Children's Personality Questionaire (Form B) followed by the Piers-Harris Children's Self-Concept Scale were administered to the six subjects during the first and last group sessions. Since a number of the children had poor reading skills, the test items were read to the entire group.

CHAPTER FOUR

RESULTS AND DISCUSSION

Table 1 shows the means, standard deviations, and correlated 't' tests (Ferguson, 1976) on the percentile score of the Piers-Harris Children's Self-Concept Scale and the Children's Personality Questionaire factor scores.

TABLE 1

Planned comparisons of Pretest and Posttest Piers-Harris Children's Self-Concept Scale and Children's Personality Questionaire Test Scores

Scales	Mean		Standard Deviation		't'Value
	pretest	posttest	pretest	posttest	
Self-Concept	37.33	40.00	12.21	8.92	.71
CPQ Factor A	3.17	2.50	2.79	1.05	.72
CPQ Factor C	3.83	5.33	.75	1.21	3.00*
CPQ Factor D	7.17	7.67	2.48	1.97	.42
CPQ Factor J	6.83	5.50	2.48	1.97	-.95
CPQ Factor O	6.00	6.50	1.41	1.52	.80

* p .025

Hypothesis 1,3,4,5,and 6 were not confirmed. The only significant

difference in the expected direction occurred on the Children's Personality Questionaire Factor C, indicating that the children demonstrated a significant increase in emotional stability. There were no significant increases in self-concept or willingness to act with the group, although change occurred in the expected direction on the two dimensions. Levels of outgoing behavior, self-assuredness, and excitability also showed no significant change.

TABLE 2

Comparison of Pretest and Posttest Means and Standard Deviations of the Piers-Harris and Children's Personality Questionairs Scores with Manual Norms

Scales	Standard Deviations			Means		
	Pretest	Posttest	Manual	Pretest	Posttest	Manual
Self-Concept	12.91	8.92	13.00	37.33	40.00	50.00
CPQ Factor A	2.97	1.05	2.90	3.17	2.50	5.00
CPQ Factor C	.75	1.21	3.40	3.83	5.33	5.00
CPQ Factor D	2.48	1.97	3.80	7.17	7.67	5.00
CPQ Factor J	2.48	1.97	2.80	6.83	5.50	5.00
CPQ Factor O	1.41	1.52	3.60	6.00	6.50	5.00

Inspection of Table 2 shows that the variability of test scores in this study is very similar to that reported in the manual. Consequently the failure to achieve statistical significance is

unlikely to be due to high variability within the scores and more likely to be due to failure in the treatment.

Inspection of Table 2 shows that pretest and posttest means for three scales tended to be lower than those reported in the manual, which may have been due to attentional problems. This interpretation is supported by the fact that the mean score for Factor D(Excitability) was higher than the mean score reported in the manual.

The present results may have also been susceptible to experimenter wise error since the dependent variables (Scale Scores) were not independent. A larger sample size and the use of MANOVA might alleviate this problem. However, the scope of the present research project was too limited to include the number of subjects required for MANOVA techniques.

The only significant change in the Children's Personality Questionaire scores occurred in emotional stability. Despite distractibility and poor concentration during certain phases of the technique, the children were better able to deal with emotional situations following the group sessions. As indicated earlier, children who scored low on this factor were described as "emotional when frustrated, easily perturbed, and evasive of responsibility" (Porter & Cattell, 1972,p.25). These characteristics are similar to the presenting behaviors that necessitated referral to a counselling center. This personality characteristic also accounted for 24% of the variance when predicting self-concept, as indicated by McIntire and

Drummond's (1977) study. Because of the lack of a control group, it is difficult to assess whether the change occurred as a result of the Structuring Self-Image technique or other factors in the group process. This remains an empirical question.

Since there was a significant increase in emotional stability, one would expect a similar change in self-concept. Although the self-concept measure showed a change in the expected direction, the change was not significant. The lack of significance may have been a function of the self-concept inventory which requires a ten point change to reach significance (Piers, 1979,p.5). Only one subject showed a change of this magnitude. Self-concept is also a multi-dimensional concept that is affected by many factors outside the group situation; for example, family and peer relationships. These factors were uncontrolled in this study. In the studies reviewed, with similar populations, change in acting out behavior occurred before any change in a self-concept inventory (Gaulden, 1975; Barrett, 1975). Whereas acting out behavior is an observable phenomena, self-concept depends upon the subject's self reports. In this group, the children were more attentive on the posttest, which may indicate that the posttest is a more valid measure of their personality.

This researcher expected that an increase in emotional stability would be accompanied by a decrease in impulsivity. However, the children in the present study showed a slight non-significant increase in excitability on the Children's Personality Questionaire, indicating an increase in impulsivity and distractibility. This increase in

excitibility was inconsistent with their actual behavior. Toward the end of the sessions, the more aggressive members became less impulsive and the more reticent members became more impulsive; these changes were observed rather than reflected in the test instruments. A similar effect was found by Barrett (1975) and Gaulden(1975). Since distractibility was a factor in this population, a measure of overt behavior, such as impulsive responses, may have shown a decrease in number following the group sessions. Future research should include measures of overt behavior and interviews with parents and teachers to further assess the effect of the program on impulsive, distractible behavior.

The children in the group also showed an increase in their willingness to act with the group but a decrease in outgoing behavior and a decrease in self-assuredness. Although the changes are non-significant, the present researcher's observations suggest that certain phases of the Structuring Self-Image technique require further adaptation for work with distractible children: Teaching relaxation skills, building stronger positive associations to the Central Self-Image, and a greater emphasis of bringing the Central Self-Image through stressful experience may have resulted in more significant changes with this population.

This researcher's observations during the sessions indicate that the children were well able to use the imagery techniques but they were unable to concentrate on the technique long enough for habitual patterns to develope. According to Lankton, the development of strong positive patterns is essential for disrupting previous,negative

associations.

Three factors appeared to affect the children's attention span. Peer influence in combination with the implusive, distractible nature of some subjects tended to disrupt the flow of imagery required by the technique. Although one of the assets of group therapy is that the more reticent members are able to try out new behaviors because of the influence of the more outgoing members (Ginott,1961; Oaklander, 1978), this is detrimental when inner processing is required. The third factor affecting the children's attention span was the external focus of awareness of this age group, and likely exaggerated in this population. As indicated above, attention to and concentration on inner processes were necessary requirements in order to ensure that strong positive associations occurred.

The most valuable experience for the children was adding positive characteristics to the Central Self-Image. It was initially difficult for some members to access positive experiences and kinaesthetic anchoring was used. Since children at this age are more concrete in their thinking, the physical cue served as a concrete reminder. This also necessitated individual work during this phase of the group process. Once one positive experience was recalled, the children were well able to recall others. Further adaptation of the technique should emphasize this phase and build stronger habit patterns. Stronger positive associations to the Central Self-Image may make the next phase, recalling stressful scenes, less anxiety-provoking.

The most difficult experience for this group was recalling stressful scenes. Although the purpose was not to increase their distress, the use of imagery appeared to open up painful areas. As indicated earlier, imagery bypasses the defensive function of the verbal modality (Shorr, 1974) and brings in information that is more closely associated with unconscious processes (Sheikh & Panagiotou, 1975). Although the child at this age is not motivated for deep insight (Schiffer, 1977), use of imagery may bring this closer to conscious awareness. The increase in impulsivity and distractibility by some members during this phase suggests that their referral behavior was a means of covering up stressful experiences. In order to further develop this phase of the treatment, greater attention to the individual's process as they go through the stressful scenes seems required. This would decrease the effect of distractible members on children who were able to work and give more time for building positive associations for the child to draw on while recalling stressful experiences.

As indicated by their ideomotor responses, most subjects were able to use the Central Self-Image at the first sign of stress. The children's need for visual and kinaesthetic cues suggest that the Central Self-Image, as a visual image, may have been insufficient to reduce stress in this group. As indicated earlier, the use of kinaesthetic anchoring is necessary for assessing positive experiences. Once one positive experience is accessed, it is easier for the children to recall other positive experiences. Building stronger associations between the kinaesthetic anchor and the visual picture may have been more fruitful with this group of children. In order to build up stronger

habit patterns, a greater stress on the individual's process would be required.

Supplementary clinical observations suggest that the Structuring Self-Image technique has potential for use with children at this age. The major factor affecting the group was their inability to concentrate long enough for habit patterns to develop. Distractibility and poor attentional skills was a major characteristic of this population. However, the children were able to attend to the phase of the technique that required building positive associations to the Central Self-Image. The problems this researcher encountered when running through stressful scenes suggest the need to build up stronger positive habit patterns with such groups before working on anxiety-provoking situations. Individual work, with an emphasis on building stronger positive associations to the Central Self-Image is needed. Working with a co-therapist or working with a smaller group would provide the individual attention required by this type of population.

Further development of the Structuring Self-Image technique has the potential for significant results with children in a clinical population. The value of the technique rests upon its emphasis on positive experiences and the use of kinaesthetic anchoring to enable the child to access these experiences. This phase of the technique was extremely important for children in this population since the behaviors they manifested were not conducive to positive reinforcement. A number of children were referred because of impulsive, distractible behaviors that affected their ability to relate positively

to family members and peers. Further research would necessitate assessing the effect of developing stronger associations between the kinaesthetic anchor and the visual picture, which would require more time and more practice with the children. In keeping with Lankton's view, once an automatic association occurred, stressful scenes could be dealt with in a positive way. The increase in emotional stability and the decrease in observable, distractible behavior following the group sessions may indicate an openness to new, more positive experiences.

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APPENDIX A

NEURO LINGUISTIC PROGRAMMING RESEARCH

IN PROCESS

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NAMES OF PEOPLE DOING RESEARCH ON
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NAME AND ADDRESS	TYPE OF RESEARCH
1. Connierae Andreas 2480 Juniper Boulder, Colorado 80302	Research on lateral eye movements and representational systems. (Dissertation in progress.)
2. Michael Cortese 35698 Smith Romulus, Michigan 48174	EEG research on hemispheric dominance and representational systems (in progress).
3. Bert Lucas 2136 Prairie Field Place Manhattan, Kansas 66502	Research in biofeedback on the response of different representational types of feedback in different sensory systems. (Dissertation - in progress.)
4. Louise Paxton 320 Quinby Rd., Rochester, NY 14623	Representational systems and counseling.

5. Margaret Childs 1523 Magnolia Street Shreveport, LA 71101	Representational systems and memory retention on serial learning tasks in different sensory systems. (Dissertation in progress.)
6. Ellen McGuire & Virginia Tadie 321 Hamilton Street Geneva, ILL. 60134	Representational systems and accessing cues. (Thesis in progress.)
7. Lee Owens c/o Department of Education Ball State University Muncie, Indiana 47306	Eye movements and representational systems. (Dissertation completed.) 1977
8. Darcy Shaw c/o Dept. of Guidance & Counseling Ball State University Muncie, Indiana 47306	Recall as affected by representational systems. (Dissertation completed) 1977
9. Ardyth A. Norem-Hebeisen University of Minnesota 330 Burton Hall 178 Pillsbury Dr. S.E. Minneapolis, Minn. 55455	NLP and drug abuse prevention and treatment. (In preparation.)
10. Robert B. Dilts 517 Mission Street Santa Cruz, CA 95060	(1) Representational systems and eye movements. (2) EEG and representational systems.
11. Charles Sergenti 41-942 Laumilo Street Waimanaco, HI 96795	Eye movements and representational systems.

12. Laura Birkholtz 282 Aspen Way Santa Barbara, CA 93111	Representational systems and personality.
13. Russ Beale Center for Human communication 120 Oak Meadow Drive Los Gatos, CA 95030	Statistical research on accessing cues.
14. Alan Salmi 1218 Washtenaw Ct. Ann Arbor, MI 48104	Eye Movements.
15. George W. Schmedlen Kent State University Counseling & Personnel Ser Education Kent, Ohio	Completed Dissertation titled "The Impact of Sensory Modality Matching on the Establishment of Rapport in Psychotherapy" completed in 1981. Should show up in the dissertation abstracts soon.
16. Thomas David Macroy Utah State University Salt Lake City, UT	Linguistic Surface Structure in Family Interaction. Completed dissertation 1978. P926-B in Dissertation Abstract.
17. Edward Q. Brengle Wayne State University Detroit, MI	Preference for sensory modality of mental imagery and its relationship to stress reduction using a systematic desensitization technique. Completed dissertation 1979.

18. Marc E. Rebstock
University of Missouri
Kansas City, MO

The Effects of Training in Matching Techniques on the Development of Rapport between Client and Counselor during initial counseling interviews. A copy of the abstract is in Dissertation Abstracts" Vol. 41 No. 03 September 1980

19. Thomason, Arbuckle & Cody

"Test of the Eye Movement Hypothesis of Neurolinguistic Programming" in Perceptual & Motor Skills, 1980, Vol. 41, P 230.

20. E. Thomas Dowd & John Pety
31 Teachers College
Educational Psychology &
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The Effect of Counselor Predicate Matching on Perceived Social Influence and Client Satisfaction.

21. Dr. Michael Yapko

The Effect of Matching Primary Representational System Predicates on Hypnotic Relaxation in "The American Journal of Clinical Hypnosis, 1981,23,179-175.

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Counselor Predicate Matching: An In Vivo Demonstration and Effectiveness, 1981.

The material on pages 42 to 46, inclusive, are missing due to lack of availability of copyright permission.

The missing information consists of the Piers-Harris Children's Self-Concept Scale. This is available through;

Counselor Recordings and Tests
Box 6184 Acklen Station
Nashville, Tennessee

The material on pages 47 to 55, inclusive, are missing due to lack of availability of copyright permission.

The missing information consists of the Children's Personality Questionaire, Form B. This is available through:

The Institute for Personality and Ability Testing
1602-04 Coronado Drive,
Champaign, Illinois
USA

APPENDIX D

DESCRIPTION OF CPQ FACTORS

FACTOR DESCRIPTION

A: Reserved, detached, critical, aloof, stiff vs warmhearted, outgoing, easygoing, participating.

B: Low intelligence vs high intelligence.

C: Emotional instability, affected by feelings, emotionally less stable, easily upset, changeable, lower ego strength vs higher ego strength, emotionally stable, mature, faces reality, calm.

D: Phlematic, deliberate, inactive, stodgy vs excitable, impatient, demanding, overactive, unrestrained, distractible.

E: Submissive, obedient, mild, easily led, docile, accomodating vs dominant, assertive, aggressive, compulsive, stubborn.

F: Sober, taciturn, serious, full of cares, uncommunicative vs enthusiastic, heedless, happy-go-lucky.

G: Low super ego strength vs super ego strength.

H: Shy, timid, restrained, emotionally cautious vs adventurous, thick skinned, socially bold, impulsive.

I: Toughminded, self-reliant, realistic vs tenderminded, sensitive, dependent, over protective (more imaginative).

J: Zestful, liking group action vs circumspect individualism, reflective, internally restrained.

N: Naivete, forthright, unpretentious, lacking self insight vs shrewdness, astute, artful, insightful regarding self and others.

O: Untroubled adequacy, assured, placid, secure, complacent, serene vs guilt-proneness, apprehensive, self-reproaching, insecure, worrying, troubled.

Q_3: Uncontrolled, lax, follows own urges, careless of social rules vs controlled, exacting will power, socially precise, compulsive, following self-image.

Q_4: Low self-sentiment, relaxed, tranquil, torpid, unfrustrated, composed vs high strength of self-sentiment, tense, frustrated, driven, overwrought, fretful.

APPENDIX E

GORDON'S TEST OF IMAGERY CONTROL

GORDON'S TEST OF IMAGERY CONTROL

1. Can you see a car standing in front of a garden gate?
2. Try and see it is a different color.
3. Can you now see the car lying upside down?
4. Now put the same car back on its four wheels.
5. Now can you see the car running along the road?
6. Can you see it climb up a very steep hill?
7. Can you see it climb across the top?
8. Can you see it get out of control and crash through a house?
9. Can you see the same car running along the road with a handsome couple inside?
10. Now can you see the car cross a bridge and fall over the side into the stream below?
11. Can you now see the car all old and dismantled in a car cemetary?

(Richardson, 1969, pg.50)

APPENDIX F

POSITIVE RESPONSES TO GORDON'S TEST OF IMAGERY CONTROL

POSITIVE RESPONSES TO GORDON'S TEST OF IMAGERY CONTROL

ITEMS	SUBJECTS					
	1	2	3	4	5	6
1	X	X	X	X	X	X
2	X	X	X	X	X	X
3	X	X	X	X	X	
4	X	X	X	X	X	
5	X	X	X	X	X	X
6	X	X	X	X	X	X
7	X	X	X	X	X	X
8		X	X			X
9	X	X	X	X	X	X
10	X	X	X	X	X	X
11		X	X			X

APPENDIX G

DESCRIPTION OF SESSIONS

APPENDIX G

DESCRIPTION OF SESSIONS

SESSION 1

CONTENT: The intention of this session was to promote a better understanding of the different ways we think, i.e., in images. According to Lankton, the self-image thinking structure is a series of conditioned past associations of images related to self that guide our behavior. The first step in disrupting past associations and developing new associations is the ability to consciously use imagery.

OBJECTIVE: My main objectives were to assess the children's primary representational system, their ability to imagine in various modalities, and their ability to cross-over modalities. The ability to imagine in all modalities and to cross-over modalities is necessary for developing the CSI and for bringing the CSI through stressful times.

APPROACH: In this session art work was interspersed with imagery techniques in order to retain the children's attention. Initially the subjects were guided through an awareness continuum in order to focus their awareness on present experience. In order to assess their ability to imagine in the various modalities they were asked to:

1. Draw a picture of something in their house(visual image).
2. Imagine a phone ringing (auditory image).
3. Imagine pushing against a wall (kinesthetic image).

Assessment of the primary representational system involved guiding them through a fantasy of climbing a flight of stairs with a door at the top. This was followed by discussion and drawings.

The children were then guided through Gordon's Test of Imagery Control (Appendix D) in order to assess their ability to control their images.

Each section was followed by discussion and an attempt was made to integrate the different ways we think.

SESSION 2

CONTENT: In this session the focus was on developing a CSI which is a visual picture of self. This necessitates concentrated awareness (involved state), the ability to look at oneself objectively (uninvolved state), and the ability to get a picture of self in one's mind and step in and out of that picture.

OBJECTIVE: My main intent was to integrate last week's session on images with self-image and to promote an understanding of the different ways we think about ourself that we are not always consciously aware of. It was particularly important that the children understand that the intensity of feelings decreases when recalling negative experiences from the past. This enables us to think of different ways we could have acted, at times in the past, so we come out of the experience feeling good about ourself.

APPROACH: This session was separated into four phases and an attempt

was made to use dramatic play with the imagery techniques.

1. In order to have the children experience an involved state and to retain their interest, they were asked to break into pairs. Each was given the opportunity to play the part of a snail. One member pretended they were to absorbed in something they could not see or hear what was going on. The other member was to get the first to react. After a few minutes they switched roles. Following this activity the children were asked to recall a time in the past when they were so completedy absorbed in something they did not hear the phone ring or their mother call them.

2. The children were asked to get a picture in their mind of their favorite television show and to watch the characters on the screen. As they are watching, one character on the screen becomes them.

3. The third phase involved developing a clear picture in their mind of their self.

4. During the fourth phase they practiced stepping in and out of the picture; being in their shoes looking out their mind's eye and then stepping out and looking at their self as if they were on a television screen.

SESSION 3

CONTENT: The purpose of this session was to add positive characteristics and another person to the visual picture of self, developed in the last session.

OBJECTIVE: My primary objective was to have the children recall positive experiences from the past and to associate the positive feelings to the visual picture. If successful, they would be able to access the positive feelings as soon as they perceived the visual picture.

APPROACH: In the previous sessions, it was apparent that the children distracted each other during the imagery tecnniques. Since this phase was crucial for structuring a positive self-image, I worked with two children at a time. The other children drew pictures related to their experiences during a centering exercise (Hendricks and Roberts, 1977) that initiated the session.

The sequence of steps necessary for adding positive characteristics to the picture of self were:

1. Recalling various experiences from the past when they were happy, confident, and secure.

2. Kinesthetically anchoring the experiences to the visual picture.

3. Changing the visual picture to fit the experiences.

4. Adding another person, who would support the child's feelings, to the visual picture.

At the end of the session the children were asked to draw pictures reflecting the positive feelings and the positive memories that were accessed during the individual work.

SESSION 4

CONTENT: The intention of this session was to build habit patterns by bringing the CSI through various scenes from pleasant to increasingly more stressful.

OBJECTIVE: My main objective was to teach the children to use the first indication of stress for bringing in the CSI.

APPROACH: This session consisted of four phases:

1. Relaxation exercise.

2. Integration of the major concepts from the previous sessions, i.e., recalling the CSI with the positive feelings and the other person to support the feelings, and stepping in and out of the visual picture.

3. During the relaxation exercise the subjects were asked to recall and bring the CSI through various pleasant scenes. The same procedure was followed for routine scenes such as, having breakfast, going to school, talking to friends, and talking to the teacher.

4. During the fourth phase, the group was separated into two. Working with three children at a time, each was guided through increasingly more tressful scenes.

5. The last phase consisted of teaching the children to bring in the CSI at the first sign of stress.

SESSION 5

CONTENT: The purpose of this session was to shape perceptions with emanated imagery; i.e., bringing the CSI through various scenes in the future where desired goals have been achieved.

OBJECTIVE:My main objectives were to have the children: a) perceive obstacles in a positive light, as necessary steps toward achieving a goal, and b) use the CSI as a guide while they were working toward a goal.

APPROACH: This session began with a relaxation exercise during which the children were guided through the following steps:

1. Run over, in your mind, some time in the future, when you have completed a goal you would like to work for. Put in everything you want to have - the people you want, interacting in the way you want, with all the positive feelings you want to have. Stay there awhile.

2. Think back through all the steps it took to get there.

3. Picture the roadblocks on the way. They will not be roadblock anymore, just memories of the things you had to go through to get to your goal; and now you can see and feel the positive experiences in each roadblock.

This sequence was repeated for a number of goals.